

APPLICATION FOR OCCUPANCY
(PLEASE PRINT PLAINLY AND
FILL IN ALL BLANK SPACES COMPLETELY)
EACH CO-RESIDENT MUST SUBMIT SEPARATE APPLICATIONS

Date of Application: _____

Expected Move-In Date: _____

Apartment #: _____ Rent per Month: \$ _____

Property: _____

I learned of this property from: _____

Applicant: _____ Male Female

Date of Birth: _____

Social Security #: _____

E-mail address: _____

Marital Status: Single Married

Spouse's Name: _____

Spouse's Social Security #: _____

of Persons occupying apartment: _____ Adult(s) _____ Child(ren)

OTHER RESIDENTS LIVING WITH YOU

Name: _____ Date of Birth: _____

Relationship: _____

Name: _____ Date of Birth: _____

Relationship: _____

Name: _____ Date of Birth: _____

Relationship: _____

Pet Description: _____ Weight: _____ Photo Required

RESIDENCE HISTORY FOR THE LAST TWO YEARS

PRESENT ADDRESS

Present Address: _____

Phone #: _____ How long at current address? _____

Landlord/Mortgage Holder: _____

Landlord/Mortgage Holder Phone #: _____

Amount of Rent/Mortgage: \$ _____ Paid as Individual: \$ _____

Loan #: _____

PREVIOUS ADDRESS IS LESS THAN TWO YEARS

Previous Address: _____

Phone #: _____ How long at current address? _____

Landlord/Mortgage Holder: _____

Landlord/Mortgage Holder Phone #: _____

Amount of Rent/Mortgage: \$ _____ Paid as Individual: \$ _____

Loan #: _____

EMPLOYMENT FOR PAST YEAR

PRESENT EMPLOYER

Employer's Name: _____

Work Phone #: _____ How long at current employer? _____

Address: _____

Supervisor's Name: _____

Monthly Gross Income: \$ _____ Title: _____

PRESENT EMPLOYER (Spouse or Co-Applicant)

Employer's Name: _____

Work Phone #: _____ How long at current employer? _____

Address: _____

Supervisor's Name: _____

Monthly Gross Income: \$ _____ Title: _____

VEHICLE INFORMATION

Driver's License #: _____

Vehicle Make: _____ / Model: _____

License Plate #: _____

2nd Vehicle Make: _____ / Model: _____

2nd Vehicle License Plate #: _____

Have you ever:

Filed for Bankruptcy? Yes No

Been evicted for Non-Payment of rent or other violations? Yes No

Been convicted of a felony? Yes No

EMERGENCY CONTACT INFORMATION

Name: _____

Phone #: _____

Address: _____

Name: _____

Phone #: _____

Address: _____

I do hereby give permission for _____ Apartments and its representatives to obtain criminal, financial, credit, employment and residential history about me from any sources necessary. I do hereby release and hold harmless any person(s) or organizations harmless for the true and accurate information they release. I also do understand the required information that is needed in order for _____ Apartments to approve my rental application. I understand that if I fail to help provide this information or provide false or misleading information, I will forfeit any fees and holding deposits I have given to _____ Apartments. Application fees are not refundable for any reason. I understand that I have 72 hours in which to cancel my application and receive a full refund of my holding deposit unless application has been approved and applicants notified. If I cancel my rental application for any reason other than additional deposit or rejection after this 72-hour time period, I understand and agree that I will forfeit my holding deposit.

Applicant

Applicant

Date
Application Received By: _____
Date: _____

Date

Application Verified By: _____
Date: _____

Application Approved By: _____
Date: _____

Not Approved: _____

Applicant's Notified By: _____
Date: _____